

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD  
2009 OCT 29 AM 10:09

COMMITTEE NAME (Must be same as on Statement of Organization)

Allen for City Council

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Royal Allen

Political Party (if applicable)

Office Sought

City Council Ottumwa, Ia

District (If Senate or House)

FORM  
**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_  
Logged In \_\_\_\_\_  
Scanned \_\_\_\_\_  
Computer \_\_\_\_\_  
Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Robert D. Beckner  
SIGNATURE OF PERSON FILING REPORT

641 694-7825  
TELEPHONE

10/29/09  
DATE SIGNED

I AM FILING A Oct. 29, 2009 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

Nov. 3, 2009  
County & Local Committees, enter County in  
which Election is held  
Wayne

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 2,000 - 00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

2,275.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2,275.00

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 0

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Return Form

SCHEDULE <b>A</b> (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

**CONTRIBUTIONS -- MONEY TAKEN IN**  
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

*ALLEN for City Council*

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/9/09	ID# CK#	Mike Vinyard 2 Birchwood Heights Dr. Ottumwa, IA 52501		\$ 100.00	<input checked="" type="checkbox"/>
9/9/09	ID# CK#	Janet Vinyard 2 Birchwood Heights Dr. Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/9/09	ID# CK#	Bob Perkins 2636 Marilyn Road Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/18/09	ID# CK#	Vicki O'Brien 1924 Chester Ave. Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/18/09	ID# CK#	Penner Berg 8 Birchwood Heights Dr. Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/9/09	ID# CK#	Rose Schutty 45 Brookside Ct. Ottumwa, IA 52501		20.00	<input checked="" type="checkbox"/>
9/18/09	ID# CK#	Paul & Lori Zingg 1722 N. Elm St. Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/18/09	ID# CK#	Jean Ann Ross 405 East Manning Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/18/09	ID# CK#	Paul & V Scott 577 E. Alta Vista Ave. Ottumwa, IA 52501		35.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 450.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 1 of 4  
 (for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)*ALLEN for City Council***SCHEDULE****A**

(Rev. 07/03)

**MONEY RECEIPTS**☐ CHECK THIS BOX IF AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
09/17/09	ID# CK#	Jack & Cecilia Barron 1414 Sunrise Circle Ottumwa, IA 52501		\$ 25.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	Michael McMillion 219 Filmore St. Ottumwa, IA 52501		50.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	James & Darla Jackson 2621 Marilyn Road Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	Sherry North 301 Richmond St. Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	Richard & Linda Amida 24 Birchwood Drive Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	Judy Blomster 14 Greenbrier Lane Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
09/17/09	ID# CK#	Bob Morrissey 10768 Glendaleburg Rd Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
09/13/09	ID# CK#	Thane & Mary Beth Homann 2359 Timberlane Heights Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
09/14/09	ID# CK#	Don & Sue Aubrey 17 Sarnowman Estate Dr. Ottumwa, IA 52501		150.00	<input checked="" type="checkbox"/>
9/9/09	ID# CK#	Peter & Mary Ann Reiter 401 N. Green St. Ottumwa, IA 52501		200.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 925.00

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 4  
(for Schedule A)

For instructions, See Back of Form

Return Form

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)*Allen for City Council***STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/27/09	ID# CK#	Greg & Marion Kenning 2 Park Lane Ottumwa, IA 52501		\$20.00	<input checked="" type="checkbox"/>
9/22/09	ID# CK#	Kept & Leina Wacker 416 W. Hwy Ave. Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/22/09	ID# CK#	Steve & Bonnie Ellison 40 Hawthornst Circle Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/23/09	ID# CK#	Jim & Judy Clingman 3 Birchwood Village Dr. Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/22/09	ID# CK#	Thomas Rondo 2301 North Court St. Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/23/09	ID# CK#	Steve and Lou Blum 111 Pike Road Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/21/09	ID# CK#	Don & Jane Berg 10000 Gladstone Rd Ottumwa, IA 52501		100.00	<input checked="" type="checkbox"/>
9/22/09	ID# CK#	John & Mary Thukada 41 Woodshire Dr. Ottumwa, IA 52501		50.00	<input checked="" type="checkbox"/>
9/23/09	ID# CK#	Shelly Riddle 1907 Allen Road Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
9/22/09	ID# CK#	Jeff & Debra Hise 1550 N. Vanduren Ave. Ottumwa, IA 52501		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$645	
TOTAL (If last page of this schedule)				2050	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 4  
(for Schedule A)

For instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)***ALLEN for City Council***SCHEDULE****A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**☒ **CHECK THIS BOX IF  
AMENDING FORM**

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/28/09	ID# CK#	R.T. Spencer 9621 109th Ave. Ottumwa, IA 52501		\$25.00	<input checked="" type="checkbox"/>
10/20/09	ID# CK#	Richard & Sue Meadows 1546 N. Elm St Ottumwa, Ia 52501		25.00	<input checked="" type="checkbox"/>
10/24/09	ID# CK#	Cindy Woodbury 411 N. Kinky Ave Ottumwa, Ia		50.00	<input checked="" type="checkbox"/>
10/24/09	ID# CK#	Chad Danner 745 E Alta Vista Pl Ottumwa, Ia 52501		100.00	<input checked="" type="checkbox"/>
10/29/09	ID# CK#	Bob Perkins 2076 Abilene Rd Ottumwa, Ia 52501		25.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$25.00

25.00

TOTAL (If last page of this schedule)

\$2095.80

25 2220.10

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 4  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*ALLEN for City Council*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/08/09	ID# CK#	US Bank	checking acct	\$13.50
9/15	ID# CK#	The Ottumwa Courier	advertising 3 ads (2x1 1/2)	90.00
9/22	ID# CK#	Ottumwa Printing	card 9/14/09	739.49
9/14	ID# CK#	US Postmaster	Stamps	88.00
9/20	ID# CK#	The Ottumwa Courier	advertising	120.00
10/21	ID# CK#	US BANK	checking acct	10.00
10/23	ID# CK#	Bill Allen	Pct. 1407	4.00
10/23	ID# CK#	Circles with Karen	9/11/09	26.75
SUB-TOTAL 10/21/09				\$1091.74
TOTAL (If last page of this schedule)				\$1091.74

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reprint Form

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Allen for City Council*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/23	ID# CK#	Ottumwa Printing	exam sign wires	\$ 91.04
10/27	ID# CK#	Ottumwa Courier	advertising	450.00
10/27	ID# CK#	Media Center	advertising	410.00
10/28	ID# CK#	Ottumwa Courier	advertising	109.29
10/23	ID# CK#	Wicks Vineyard	concord	79.93
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1197.26
TOTAL (If last page of this schedule)				\$ 2275.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page *2* of *2*

(for Schedule B)